



# Instructor II

## Certification Task Book Application



### Identification

Candidate: \_\_\_\_\_

SFT ID Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ Phone (Mobile): \_\_\_\_\_

Phone (Work): \_\_\_\_\_ Email: \_\_\_\_\_

Agency: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

How would you prefer to receive your certification task book?

☐ Email (to address listed above) ☐ US mail (to home mailing address)

### Instructions

1. To apply for a certification task book, download (from the SFT website), complete and submit:
  - a. The SFT Fee Schedule
  - b. The certification task book application for the job function certification being pursued
2. A complete certification task book application package includes:
  - a. The SFT Fee Schedule
  - b. Nonrefundable payment by check or money order (payable to CAL FIRE – State Fire Training)
  - c. The certification task book application
  - d. All supporting and verification documentation
3. Submit the complete certification task book application package to:  
State Fire Training  
Attn: Cashier  
PO Box 997446  
Sacramento, CA 95899-7446

## Prerequisites

### Certification

1. Document the certification number and completion date for the job function certification.
2. Submit verification for the job function certification.

Certification	Certification Number	Completion Date
OSFM Instructor I <b>OR</b> OSFM Training Instructor I <b>OR</b> OSFM Fire Instructor I Certification		

## Education

1. Document the completion of the required course.
2. Submit a course completion certificate for the course listed below.

Course	Completion Date (listed on certificate)
Instructor II: Instructional Development	

## Rank or Position

State Fire Training confirms that there are no rank or position requirements to obtain this certification task book.

## Certification Exam

SFT anticipates implementation of a certification examination at a future date.

## Authorities

1. Print name, sign, and date the candidate statement.
2. Ask your fire chief or the authorized designee to complete the fire chief statement.

**Candidate:** \_\_\_\_\_  
Candidate's Printed Name

I, the undersigned, am the person applying for an Instructor I Certification Task Book. I hereby certify under penalty of perjury under the laws of the State of California, that all information contained in this application is true in every respect. I understand that misstatements, omissions of material facts, or falsification of information or documents may be cause for rejection.

\_\_\_\_\_  
Candidate's Signature                      Date

**Candidate's Fire Chief:** \_\_\_\_\_  
Fire Chief's (or Authorized Designee's) Printed Name

I, the undersigned, am the person authorized to verify the candidate's application information. I hereby certify under penalty of perjury under the laws of the State of California, that all information contained in this application is true in every respect. I understand that misstatements, omissions of material facts, or falsification of information or documents may be cause for rejection.

\_\_\_\_\_  
Fire Chief's (or Authorized Designee's) Signature                      Date

## Approval and Authorization

### Complete Application

☐ The candidate has met all application requirements and will be issued a certification task book.

\_\_\_\_\_  
State Fire Training Representative's Signature                      Date